

STATEMENT OF ECONOMIC INTERESTS

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GOVERNOR'S OFFICE
LEGAL AFFAIRS

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
BOUTON	DARREN	CHRISTOPHER	
MAILING ADDRESS (May use business address)	STREET	CITY	STATE ZIP CODE
STATE CAPITOL	SACRAMENTO	CA	95814
			OPTIONAL: FAX / E-MAIL ADDRESS
			916-324-6358

1. Office, Agency, or Court

Name of Office, Agency, or Court:

OFFICE OF GOVERNOR

Division, Board, District, if applicable:

CABINET

Your Position:

DEPUTY CABINET SECRETARY

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ County of _____

☐ City of _____

☐ Multi-County _____

☐ Other _____

3. Type of Statement (Check at least one box)

☐ Assuming Office/Initial

Date: ____/____/____

☐ Annual: The period covered is January 1, 2008, through December 31, 2008.

-or-

☒ The period covered is 1/22/08, through December 31, 2008.

☐ Leaving Office

Date Left: ____/____/____

(Check one)

☐ The period covered is January 1, 2008, through the date of leaving office.

-or-

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate

Election Year: _____

4. Schedule Summary

► Total number of pages

including this cover page: 3

► Check applicable schedules or "No reportable interests."

I have disclosed interests on one or more of the attached schedules:

Schedule A-1 ☐ Yes - schedule attached
Investments (Less than 10% Ownership)

Schedule A-2 ☐ Yes - schedule attached
Investments (10% or greater Ownership)

Schedule B ☒ Yes - schedule attached
Real Property

Schedule C ☐ Yes - schedule attached
Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)

Schedule D ☐ Yes - schedule attached
Income - Gifts

Schedule E ☒ Yes - schedule attached
Income - Gifts - Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

3-31-09

Signature

(Print name of official.)

DARREN BOUTON

► **STREET ADDRESS OR PRECISE LOCATION**

PARCEL #: 117-100-004-000

CITY

TAHOE VISTA

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

 / /08 / /08
 ACQUIRED DISPOSED

NATURE OF INTEREST

- ☒ Ownership/Deed of Trust ☐ Easement
- ☐ Leasehold _____ ☐ _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

GPB6 WILSON

► STREET ADDRESS OR PRECISE LOCATION

CITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

 / /08 / /08
 ACQUIRED DISPOSED

NATURE OF INTEREST

- ☐ Ownership/Deed of Trust ☐ Easement
- ☐ Leasehold _____ ☐ _____
- Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS

BUSINESS ACTIVITY OF LENDER

INTEREST RATE**TERM (Months/Years)**

_____ % ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS

BUSINESS ACTIVITY OF LENDER

INTEREST RATE

TERM (Months/Years)

_____ % ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments:

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM 700 <small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name <u>DARREN BOUTON</u>

- Reminder – you must mark the gift or income box.
- You are not required to report "income" from government agencies.

▶ NAME OF SOURCE <u>CALIFORNIA STATE PROTOCOL FOUNDATION</u>
ADDRESS <u>1215 K STREET, SUITE 1400</u>
CITY AND STATE <u>SACRAMENTO, CA 95814</u>
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>BORDER GOVERNORS CONFERENCE 2008</u>
DATE(S): <u>8/12/08 - 8/15/08</u> AMT: \$ <u>293.13</u> <small>(if applicable)</small>
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income
DESCRIPTION: <u>LODGING, MEALS</u>

▶ NAME OF SOURCE <u>CALIFORNIA STATE PROTOCOL FOUNDATION</u>
ADDRESS <u>1215 K STREET, SUITE 1400</u>
CITY AND STATE <u>SACRAMENTO, CA 95814</u>
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>GOVERNORS GLOBAL CLIMATE SUMMIT</u>
DATE(S): <u>11/17/08 - 11/19/08</u> AMT: \$ <u>575.18</u> <small>(if applicable)</small>
TYPE OF PAYMENT: (must check one) <input checked="" type="checkbox"/> Gift <input type="checkbox"/> Income
DESCRIPTION: <u>LODGING, MEALS</u>

▶ NAME OF SOURCE
ADDRESS
CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): ____/____/____ - ____/____/____ AMT: \$ ____ <small>(if applicable)</small>
TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income
DESCRIPTION: _____

▶ NAME OF SOURCE
ADDRESS
CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): ____/____/____ - ____/____/____ AMT: \$ ____ <small>(if applicable)</small>
TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income
DESCRIPTION: _____

Comments: _____